



General Assembly

February Session, 2006

Amendment

LCO No. 5692

HB0559505692HD0

Offered by:

REP. O'CONNOR, 35th Dist.

SEN. CRISCO, 17th Dist.

REP. VILLANO, 91st Dist.

REP. SAYERS, 60th Dist.

To: Subst. House Bill No. 5595

File No. 315

Cal. No. 219

"AN ACT CONCERNING THE HEALTHY KIDS INITIATIVE."

1 Strike lines 1 to 356, inclusive, in their entirety and substitute the
2 following in lieu thereof:

3 "Section 1. (NEW) (*Effective July 1, 2006*) There is established a
4 Nutmeg Health Partnership Insurance Plan. The plan shall consist of
5 the measures set forth in section 2 of this act and sections 38a-472d and
6 38a-476c of the 2006 supplement to the general statutes for the purpose
7 of making health insurance accessible and affordable for residents of
8 this state.

9 Sec. 2. (*Effective from passage*) Not later than January 1, 2009, the joint
10 standing committee of the General Assembly having cognizance of
11 matters relating to insurance shall develop a plan to provide health
12 insurance that is accessible and affordable for all of the residents of this
13 state.

14 Sec. 3. (NEW) (*Effective October 1, 2006*) Each physician licensed
15 under chapter 370 of the general statutes and engaged in the private
16 practice of medicine in this state shall:

17 (1) Provide, upon request of the patient or such patient's designee,
18 an estimate of the costs of any service or treatment to the patient or his
19 or her designee prior to the service or treatment being rendered; and

20 (2) Provide an itemized receipt to the patient or such patient's
21 designee for any payment made at such physician's office by or on
22 behalf of such patient, which shall specify the services rendered to the
23 patient and the charges for each such service.

24 Sec. 4. Section 19a-690 of the general statutes is repealed and the
25 following is substituted in lieu thereof (*Effective from passage*):

26 (a) Any licensed health care practitioner or practitioner group
27 operating or replacing any magnetic resonance imaging equipment or
28 providing any magnetic resonance imaging service shall obtain
29 magnetic resonance imaging accreditation by the American College of
30 Radiology, [or] its successor organization, or an alternate nationally
31 recognized accrediting organization, for all equipment, services and
32 personnel involved with such magnetic resonance imaging activities of
33 such practitioner or practitioner group. Such accreditation shall be
34 obtained not later than eighteen months after July 1, 2001, or eighteen
35 months after the date on which such magnetic resonance imaging
36 activities are first conducted, whichever is later. Upon the expiration of
37 the applicable eighteen-month period, no magnetic resonance imaging
38 equipment may be operated or replaced and no magnetic resonance
39 imaging service may be provided by any such practitioner or
40 practitioner group that does not receive accreditation as required by
41 this section. Evidence of such accreditation shall be maintained at any
42 facility at which magnetic resonance imaging equipment is operated or
43 replaced or at which magnetic resonance imaging service is provided
44 and shall be made available for inspection upon request of the
45 Department of Public Health.

46 (b) Notwithstanding the provisions of subsection (a) of this section,
47 any licensed health care practitioner or practitioner group that is
48 accredited as provided in subsection (a) of this section shall continue to
49 be subject to the obligations and requirements applicable to services
50 provided and the acquisition of equipment by such practitioner or
51 practitioner group, including, but not limited to, any applicable
52 certificate of need requirements as provided in chapter 368z and any
53 applicable licensure requirements as provided in chapter 368v.

54 Sec. 5. Section 17b-261a of the 2006 supplement to the general
55 statutes is repealed and the following is substituted in lieu thereof
56 (*Effective July 1, 2006*):

57 [(a) Any transfer or assignment of assets resulting in the imposition
58 of a penalty period shall be presumed to be made with the intent, on
59 the part of the transferor or the transferee, to enable the transferor to
60 obtain or maintain eligibility for medical assistance. This presumption
61 may be rebutted only by clear and convincing evidence that the
62 transferor's eligibility or potential eligibility for medical assistance was
63 not a basis for the transfer or assignment.

64 (b) Any transfer or assignment of assets resulting in the
65 establishment or imposition of a penalty period shall create a debt, as
66 defined in section 36a-645, as amended, that shall be due and owing by
67 the transferor or transferee to the Department of Social Services in an
68 amount equal to the amount of the medical assistance provided to or
69 on behalf of the transferor on or after the date of the transfer of assets,
70 but said amount shall not exceed the fair market value of the assets at
71 the time of transfer. The Commissioner of Social Services, the
72 Commissioner of Administrative Services and the Attorney General
73 shall have the power or authority to seek administrative, legal or
74 equitable relief as provided by other statutes or by common law.]

75 [(c) The] (a) To the extent permitted by federal law, the
76 Commissioner of Social Services may waive the imposition of [a] any
77 penalty period relating to the transfer or assignment of assets when the

78 transferor (1) in accordance with the provisions of section 3025.25 of
79 the department's Uniform Policy Manual, suffers from dementia at the
80 time of application for medical assistance and cannot explain transfers
81 that would otherwise result in the imposition of a penalty period; or
82 (2) suffered from dementia at the time of the transfer; or (3) was
83 exploited into making such a transfer due to dementia. [Waiver of the
84 imposition of a penalty period does not prohibit the establishment of a
85 debt in accordance with subsection (b) of this section.]

86 [(d)] (b) The Commissioner of Social Services, pursuant to section
87 17b-10, shall implement the policies and procedures necessary to carry
88 out the provisions of this section while in the process of adopting such
89 policies and procedures in regulation form, provided notice of intent to
90 adopt regulations is published in the Connecticut Law Journal not later
91 than twenty days after implementation. Such policies and procedures
92 shall be valid until the time final regulations are effective."